

ISSUE FEE TRANSMITTAL



1. *RECEIVED MAIL ROOM
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2A. The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified below.

(Signature of party in interest of record)

(Date)

By:

5-6-85

Note: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
First Named Applicant	1	1	1	1

TITLE OF
INVENTION

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1	1	1	1	1	1	1

1A. Further correspondence to be mailed to the following:

FELFE & LYNCH
805 THIRD AVENUE
NEW YORK, N.Y. 10022

2B. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

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3. ASSIGNMENT DATA (print or type)

A. (1) This application is NOT assigned.
(2) Assignment previously submitted to the Patent and Trademark Office.
(3) Assignment submitted herewith.

B. For Printing On The Patent: (Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data below is only appropriate when an assignment has been previously submitted to the PTO or is submitted herewith. Completion of this form is NOT a substitute for filing of an assignment as required by 37 C.F.R. 1.334).

(1) NAME OF ASSIGNEE:

Sloan-Kettering Institute for Cancer Research
(2) ADDRESS: (City & State or Country)
New York, New York

(3) STATE OF INCORPORATION, IF
ASSIGNEE IS A CORPORATION:
New York

4.

The following fees are enclose:

Issue fee Advanced order Assignment recording

The following fees should be charged to

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PTOL-85b (Rev. 8-82)

250-2422
U.S. Department of Commerce
Patent and Trademark Office

ISSUE FEE TRANSMITTAL

This form is provided in lieu of a formal transmittal and should be used for transmitting the Issue Fee. Sections 1A through 4 must be completed as appropriate.

INVENTOR'S ADDRESS CHANGE / SC/SERIAL NO.

INVENTOR'S NAME

Street Address

City, State and Zip Code

CO-INVENTOR'S NAME

Street Address

City, State and Zip Code

 Check if additional changes are on reverse side.

MAILING INSTRUCTIONS

All further correspondence including the Issue Fee Receipt, the Patent, and advanced orders will be mailed to the addressee entered in section 1 on PTOL-85c, unless you direct otherwise by specifying the appropriate name and address in 1A below.

2A. The COMMISSIONER OF PATENTS AND TRADE-MARKS is requested to apply the Issue Fee to the application identified below.

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(Date)

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5-6-85

SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
US/622,725	06/20/84	024	FREEDMAN, S.	125 06/12/85
First Named Applicant	MARRELL,		RAYMOND, P.	JR.

TITLE OF INVENTION USE OF GALLIUM SALTS TO TREAT DISORDERS OF CALCIUM HOMEOSTASIS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
SK276.1	424-127.000	F73	UTILITY	YES	4250.00	05/13/85

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FELFE & LYNCH
805 THIRD AVENUE
NEW YORK, N. Y. 10022

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New York

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